



ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY

Governor Jane Dee Hull

Richard W. Tobin II, Acting Director

WATER QUALITY COMPLIANCE ASSURANCE SECTION

REGULATED AGRICULTURE ACTIVITIES (CONCENTRATED ANIMAL FEEDING OPERATIONS (CAFO))

WATER QUALITY INSPECTION CHECKLIST

GENERAL INFORMATION

Facility Name : _____

Facility Location : _____

Mailing Address : _____

County : _____

Owner and Phone Number: _____

On-site Representative's Name, Title, and Phone Number: _____

Date of Inspection: _____ Time: _____

Assessment by: _____

Accompanied by: _____

FACILITY OPERATION INFORMATION

Type of Operation:

- | | |
|---------------|---------------------------|
| 1. Dairy | 7. Horses |
| 2. Beef Lot | 8. Livestock Market |
| 3. Calf Ranch | 9. Ostriches |
| 4. Chicken | 10. Others, specify _____ |
| 5. Turkeys | |
| 6. Swine | |

Number of Animals:

1. Milking Cows: _____
2. Dry Cows: _____
3. Calf (Heifers): _____
4. Beef Cattle: _____
5. Swine: _____
6. Horses: _____
7. Sheep/Lambs: _____
8. Chicken: _____
9. Turkeys: _____
10. Other: _____ Specify: _____.

Does the facility meet the definition requirements for a CAFO and a NPDES Permit?

Yes _____ No _____ Comment: _____

Do all of the facility's operating practices meet the standards, specifications and methods described in the NRCS Field Office Technical Guide and the NRCS Agricultural Waste Management Field Handbook? Yes _____ No _____

Have the following been inventoried and evaluated by the facility operator to identify potential pollution sources and to determine water quality protection needs:

- | | | |
|--|---------|--------|
| 1. Application of nitrogen fertilizer used in the operation: | Yes____ | No____ |
| 2. Irrigation systems and tillage practices used in operation: | Yes____ | No____ |
| 3. Animal confinement areas: | Yes____ | No____ |
| 4. Manure handling and storage facilities: | Yes____ | No____ |
| 5. Waste water handling and storage facilities: | Yes____ | No____ |
| 6. Drainage systems: | Yes____ | No____ |
| 7. Drinking Water Wells: | Yes____ | No____ |

FIELD OBSERVATIONS

R18-9-202 Agricultural General Permits: Nitrogen Fertilizer Requirements

Application of Nitrogen Fertilizer

Description of total acreage(s) of land application(s) to crop field(s)_____

Description of crop plant needs and land application(s) of manure at the agronomic rate (tons/acre)

Description of soils, including their physical capacity to accept manure application(s) _____

Irrigation Systems and Tillage Practices

Description of total acreage(s) of land application(s) to crop fields(s)_____

Description of crop plant needs and land application(s) of irrigated water (wastewater) at the agronomic rate (gallons/acre) _____

Description of soils, including their physical capacity to accept irrigated (wastewater) application(s)

Description of tillage practices_____

Does the facility meet the requirements for R18-9-202 Agricultural general permits: nitrogen fertilizers? Yes_____ No_____

R18-9-203 Agricultural General Permits: CAFO Requirements

Animal Confinement Areas

Adequate diversion of storm water around animal confinement areas? Yes___ No___

Evidence of standing fluids in animal confinement areas? Yes___ No___

Manure Handling and Storage Facilities

How is the manure stored on site and where? _____

If manure is stored on-site, is the runoff contained? Yes _____ No _____

Comment: _____

Wastewater Handling and Storage Facilities

Wastewater Collection System:

1. Number of lagoons currently in use___

2. If more than one pond exists, can the ponds be operated in series Yes___No___

3. Are the ponds lined Yes___No___

4. Lagoon(s) Capacity is Adequate to the Size of the Operation: Yes___No___

Comment: _____

5. Is the lagoon(s): (a) aerobic___ or (b) anaerobic___

6. Chemicals added to lagoon(s) include : _____

7. Average depth of water in each lagoon ___ ft

8. Amount of freeboard (measured vertically) in each lagoon___ ft

9. Description of and amount of vegetation in lagoon(s):

10. Description of berm slope, width and integrity (erosion, rodent population, seepage,.....etc)

11. Description of odors and color of wastewater in lagoon(s):

12. Description of the general maintenance of lagoon (s):

Records on file:

1. Lagoon wastewater analysis: Yes___No___N/A___

2. Groundwater analysis: Yes___No___N/A___

3. Site plan: Yes___No___N/A___

Drainage Systems

Potential Surface waters impacts:

1. Man-made conveyance or State's waterways goes through the facility: Yes____No____
2. Flood-Control conveyance or other surface water bodies borders any of the perimeter of the facility: Yes____No____
3. Impacted water body:_____

Contaminated storm water runoff is adequately diverted and contained: Yes____No____

Comment:_____

**Does the facility meet the requirements for R18-9-203 Agricultural general permits:
Concentrated animal feeding operations?____Yes ____No**

Drinking Water Wells

1. Number of wells: _____
2. Static watertable depth: _____
3. Distance and grade from corrals:_____
4. Casing type: _____
5. Distance and grade from septic system: _____

Does the handling of waste at the facility impair the quality of any drinking water wells? Yes____
No____ Unknown _____

R18-11-108 Narrative Water Quality Standards and R18-11-109 Surface Water Quality Standards

Manure and/or dead animals and/or contaminated water discharge(s) into waters of the state observed:
Yes____No____if yes, explain_____

If yes a)

Photographs taken: Yes____No____ if yes, use photo log.

b)Water samples taken: Yes____No____ if yes, test requests:

Fecal Coliform and/or E. Coli: Yes____No____

Ammonium nitrogen: Yes____No____

Nitrate/Nitrogen Yes____No____

pH Yes____No____

Other _____

Does the facility meet R18-11-108 Narrative Water Quality Standards? ____Yes ____No

Does the facility meet R18-11-109 Numeric Water Quality Standards? ___Yes ___No

GPS Coordinates:

GPS taken by: _____

GPS filename_____

Date_____Time_____Points_____

Latitude:N_____Longitude:W_____

(Attach a copy of the additional IRM/GIS/GPS sheets to the completed report of all inspections).

INSPECTION SAMPLES AND PHOTOGRAPH LOG

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A. Photograph Log:

Photo Number	Description

B. Samples Log:

Sample Number	Time	Location	Analytes

Facility Diagram (drawing not to scale)